

The Alaska Prostate Cancer Coalition (APCC) Corporate Grant Guidelines

Thank you for applying for a grant from the Alaska Prostate Cancer Coalition. The primary focus of our organization's fund raising efforts is to raise awareness and decrease the implications of testicular and prostate cancer. Our mission is to keep the funds in Alaska by community awareness through: outreach, education, research, early detection and the treatment choices available. The focus in your grant request must directly support this. \$5,000 is the maximum grant request amount.

There will be a serious peer review of all proposals. Please keep the proposals brief, approximately four pages, excluding the cover sheet or summary, description of qualifications, key staff resumes and any other backup material.

Include a brief project overview, statement of proposed objective(s) and estimated timetable, budget and justification, and a clear description of the principal director or principal program director.

A complete grant application should include:

1. Cover sheet or summary
2. Application with:
 - Abstract (approximately 100 words providing synopsis of proposed project)
 - Proposal
3. Attachments (limit 10 pages)

Resume and/or qualifications/job description of main project investigator(s)/member(s) (who they are, what have you done). Limit 5 pages. Any relevant supplementary materials, i.e., brochures, samples of similar work completed.

The Board is keenly interested to be able to document that the money donated by our entrants and sponsors is well spent, so peer review will cover not only the validity of the central proposal but the grant recipients plans to document and communicate the results to the public and to the Board. An oral presentation of your proposal to the Executive Board will be required. Contact Les Day @ prostatak@gmail.com or 223-0311.

Collaboration with other agencies already working in the field are strongly encouraged; be sure and describe any pertinent collaborations in your applications

Organizations that collaborate are strongly encouraged, be sure and describe any pertinent collaborations in your application. We are stewards of the money donated by our race entrants as well as sponsors and strive to get the most benefit possible.

Send five (5) copies of your proposal to: Alaska Prostate Cancer Coalition
Grant Committee
PO Box 242494
Anchorage, AK 99524-2494

Also email a copy to prostatak@gmail.com

Thank you for your desire to impact prostate and testicular cancer in Alaska and hopefully the nation.

Cover/Summary Sheet
Alaska Prostate Cancer Coalition (APCC) Grant Application

Name/Organization: _____

Address: _____

Phone: _____ Fax: _____

Email: _____

Contact Person/Title: _____

Check one that applies:

Government: _____ Non-profit: _____ Individual: _____ Other: _____

IRS Tax ID Number: _____

Has the applicant received APCC Run funding in the past? If yes, list year(s),
amount received and project title: _____

Name of community to be served by the grant: _____

Describe the purpose of your proposal/project and its specific link to

Prostate and or testicular cancer: _____

Target population: _____

Number to be served through the project: _____

Outcome(s) expected with this funding: _____

Date Submitted: _____

Method of evaluation: _____

Is there a plan for continued activity beyond the grant support? Describe: _____

Total budget for requested project: _____

Total amount requested: _____

Other sources of funding for this project: _____

Project Director (print name)

Project Director (signature)

Date